Company Tracking Number: R-02958

TOI: H04 Health - Blanket Accident/Sickness Sub-TOI: H04.000 Health - Blanket Accident/Sickness

Product Name: Blanket Sports Accident - Aggregate Deductible Rider

Project Name/Number: Aggregate Deductible Rider/R-02958

Filing at a Glance

Company: Fidelity Security Life Insurance Company

Product Name: Blanket Sports Accident - SERFF Tr Num: FDLT-126582051 State: Arkansas

Aggregate Deductible Rider

TOI: H04 Health - Blanket Accident/Sickness SERFF Status: Closed-Approved- State Tr Num: 45421

Closed

Sub-TOI: H04.000 Health - Blanket Co Tr Num: R-02958 State Status: Approved-Closed

Accident/Sickness

Filing Type: Form Reviewer(s): Rosalind Minor

Authors: Jennifer Glaser, Kelly Disposition Date: 04/19/2010

Humiston, Teresa Saling, Tara

Wilson

Date Submitted: 04/14/2010 Disposition Status: Approved-

Closed

Implementation Date Requested: On Approval Implementation Date:

State Filing Description:

General Information

Project Name: Aggregate Deductible Rider Status of Filing in Domicile: Pending

Project Number: R-02958 Date Approved in Domicile:

Requested Filing Mode: Review & Approval

Domicile Status Comments: Missouri our domicile state was submitted on 4/14/2010.

Explanation for Combination/Other: Market Type: Group

Submission Type: New Submission Group Market Size: Small and Large

Overall Rate Impact: Group Market Type: Blanket

Filing Status Changed: 04/19/2010 Explanation for Other Group Market Type:

State Status Changed: 04/19/2010

r Date: Created By: Teresa Saling

Corresponding Filing Tracking Number:

Deemer Date:

Submitted By: Tara Wilson

Filing Description:

Fidelity Security Life Insurance Company NAIC #71870 FEIN #43-0949844

Blanket Group Health

R-02958 Aggregate Deductible Amendment Rider

Company Tracking Number: R-02958

TOI: H04 Health - Blanket Accident/Sickness Sub-TOI: H04.000 Health - Blanket Accident/Sickness

Product Name: Blanket Sports Accident - Aggregate Deductible Rider

Project Name/Number: Aggregate Deductible Rider/R-02958

We respectfully submit the above form for your review and approval. This form is new and does not replace any form previously filed or approved by your state. The form will be used with form M-3024AR, previously approved by your Department on September 13, 2000.

The base product provides coverage that is solicited by licensed agents to schools and athletic organizations. The premium for the insurance will be paid by the policyholder.

The Policy form provides for an Individual Deductible. This Rider allows the Policyholder to elect an Aggregate Deductible instead of an Individual Deductible or in addition to the Individual Deductible.

Variable information is indicated by brackets { }. The variables are to be read as though the phrase is in, out, or the choices shown. The variables will not be adjusted to be less favorable than your state allows.

If you have any questions or require additional information, please feel free to telephone me at (800) 648-8624, extension 1276, or Email me at tsaling@fslins.com.

Company and Contact

Filing Contact Information

Teresa Saling, Contract Analyst tsaling@fslins.com

3130 Broadway 800-648-8624 [Phone] 1276 [Ext]

Kansas City, MO 64111-2406 816-751-6026 [FAX]

Filing Company Information

Fidelity Security Life Insurance Company CoCode: 71870 State of Domicile: Missouri

3130 Broadway Group Code: 451 Company Type: Life & Health

Kansas City, MO 64111-2406 Group Name: State ID Number:

(800) 648-8624 ext. [Phone] FEIN Number: 43-0949844

Filing Fees

Fee Required? Yes
Fee Amount: \$50.00
Retaliatory? Yes

Fee Explanation:

Per Company: No

Company Tracking Number: R-02958

TOI: H04 Health - Blanket Accident/Sickness Sub-TOI: H04.000 Health - Blanket Accident/Sickness

Product Name: Blanket Sports Accident - Aggregate Deductible Rider

Project Name/Number: Aggregate Deductible Rider/R-02958

COMPANY AMOUNT DATE PROCESSED TRANSACTION #

Fidelity Security Life Insurance Company \$50.00 04/14/2010 35656846

Company Tracking Number: R-02958

TOI: H04 Health - Blanket Accident/Sickness Sub-TOI: H04.000 Health - Blanket Accident/Sickness

Product Name: Blanket Sports Accident - Aggregate Deductible Rider

Project Name/Number: Aggregate Deductible Rider/R-02958

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved- Closed	Rosalind Minor	04/19/2010	04/19/2010

Company Tracking Number: R-02958

TOI: H04 Health - Blanket Accident/Sickness Sub-TOI: H04.000 Health - Blanket Accident/Sickness

Product Name: Blanket Sports Accident - Aggregate Deductible Rider

Project Name/Number: Aggregate Deductible Rider/R-02958

Disposition

Disposition Date: 04/19/2010

Implementation Date: Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

Company Tracking Number: R-02958

TOI: H04 Health - Blanket Accident/Sickness Sub-TOI: H04.000 Health - Blanket Accident/Sickness

Product Name: Blanket Sports Accident - Aggregate Deductible Rider

Project Name/Number: Aggregate Deductible Rider/R-02958

Schedule Schedule Item Schedule Item Status Public Access

Supporting DocumentFlesch CertificationApproved-ClosedYesSupporting DocumentApplicationApproved-ClosedYesFormAggregate Deductible Amendment RiderApproved-ClosedYes

Company Tracking Number: R-02958

TOI: H04 Health - Blanket Accident/Sickness Sub-TOI: H04.000 Health - Blanket Accident/Sickness

Product Name: Blanket Sports Accident - Aggregate Deductible Rider

Project Name/Number: Aggregate Deductible Rider/R-02958

Form Schedule

Lead Form Number: R-02958

Schedule Form	Form Type Form Name	Action	Action Specific	Readability	Attachment
Item Number			Data		
Status					
Approved- R-02958	Policy/Cont Aggregate	Initial		50.000	R-02958.pdf
Closed	ract/Fratern Deductible				
04/19/2010	al Amendment Rider				
	Certificate:				
	Amendmen				
	t, Insert				
	Page,				
	Endorseme				
	nt or Rider				



FIDELITY SECURITY LIFE INSURANCE COMPANY

3130 Broadway Kansas City, Missouri 64111-2406 Phone 800-648-8624 A STOCK COMPANY (Herein Called "the Company")

AGGREGATE DEDUCTIBLE AMENDMENT RIDER

By attachment of this Rider, the {Policy}{/}{Certificate} is amended by the following:

1. The third paragraph in the **EXCESS ACCIDENT MEDICAL EXPENSE** benefit in **SECTION II** – **DESCRIPTION OF COVERAGES** section is deleted in its entirety and replaced with the following:

If the Insured incurs Covered Charges for covered Accidental Bodily Injuries suffered in one accident, We will cover the cost of those charges, subject to the {Individual Deductible} {and} {Aggregate Deductible}, and up to the Maximum Benefit Amount. The Deductible and Maximum Benefit Amount are shown in the {Policyholder's Application} {Schedule}. The Covered Charges are deemed incurred on the date on which the treatment is rendered or the service is given.

2. The definition of **Covered Charges** in the **EXCESS ACCIDENT MEDICAL EXPENSE** benefit in **SECTION II - DESCRIPTION OF COVERAGES** section is deleted in its entirety and replaced with the following:

Covered Charges are inpatient and outpatient benefits described below that are prescribed by a Physician and are Medically Necessary:

- 1. Hospital charge for semi-private room and board;
- 2. Hospital charge for use of an operating room;
- 3. Physician and surgeon fees (including oral surgeon);
- 4. licensed graduate nursing services, and the nurse is not a member of the Insured's Immediate Family;
- 5. medical appliances, artificial limbs;
- 6. Emergency ground or air ambulance services. "**Emergency**" means medical circumstances that, if left untreated, would result in the Insured's immediate loss of life or limb;
- 7. medical or surgical treatment, services, supplies, prescription drugs and any other Medically Necessary service.

Covered Charges are payable at {80% - 100%} of the Reasonable and Customary amount. No benefits are payable for Covered Charges used to satisfy the {Individual Deducible} {or} {Aggregate Deductible}, or that are incurred after the Maximum Benefit Amount or Maximum Benefit Period are exhausted.

3. The definition of **Deductible** in the **EXCESS ACCIDENT MEDICAL EXPENSE** benefit in **SECTION II - DESCRIPTION OF COVERAGES** section is deleted in its entirety and replaced with the following:

Deductible means the {Aggregate Deductible} {and} {Individual Deductible} as shown in the {Policyholder's Application} {Schedule}.

R-02958 {###}

4. The **EXCESS ACCIDENT MEDICAL EXPENSE** benefit in **SECTION II - DESCRIPTION OF COVERAGES** section is amended by adding the following:

{Individual Deductible means an amount of Covered Charges which must be paid by the Insured or on behalf of the Insured before this Policy will pay benefits. This would include amounts paid under any other policy or service contract for Covered Charges.}

{Aggregate Deductible means an amount of Covered Charges which must be paid by the Policyholder for all Insureds during a Policy Year before the Policy will pay benefits. {No amounts used to satisfy the Individual Deductible will be used to satisfy the Aggregate Deductible.}

Policy Year means each 12 month period beginning on the Policy Effective Date and ending at 12:01 a.m. of the subsequent year. Each successive Policy Year will begin on the next anniversary of the Policy Effective Date for a 12 month period, and will end at 12:01 a.m. of the subsequent year.}

This Rider takes effect on the {later of the} effective date {of the {Policy}{/}{Certificate} to which it is attached} {or {Month Day, Year}} {shown in the Certificate Schedule}. This Rider terminates concurrently with the {Policy}{/}{Certificate} to which it is attached. It is subject to all the definitions, limitations, exclusions and conditions of the {Policy}{/}{Certificate} except as stated.

FIDELITY SECURITY LIFE INSURANCE COMPANY

SERFF Tracking Number: FDLT-126582051 State: Arkansas
Filing Company: Fidelity Security Life Insurance Company State Tracking Number: 45421

Company Tracking Number: R-02958

TOI: H04 Health - Blanket Accident/Sickness Sub-TOI: H04.000 Health - Blanket Accident/Sickness

Product Name: Blanket Sports Accident - Aggregate Deductible Rider

Project Name/Number: Aggregate Deductible Rider/R-02958

Supporting Document Schedules

Item Status: Status

Date:

Satisfied - Item: Flesch Certification Approved-Closed 04/19/2010

Comments:

Please see attached.

Attachment:

R-02958 Readability Certification.pdf

Item Status: Status

Date:

Bypassed - Item: Application Approved-Closed 04/19/2010

Bypass Reason: Not applicable, filing includes Rider only.

Comments:

FIDELITY SECURITY LIFE INSURANCE COMPANY

Kansas City, Missouri

form			hat the Flesch reading ease score for policy ements of the NAIC Policy Language Model
inclu nam page	ides the following: (a) name an e, number and title of the polic	d address o y; index pag	inguage has been excepted. Such language f Fidelity Security Life Insurance Company; je; captions and subcaptions; specifications I in the policy; and (c) medical terminology, if
*	R-02958		
	Score	50	
		,	Martine Madden Martha E. Madden Vice President and General Counsel
			April 14, 2010 Date